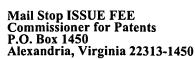
PART B - FEE(S) TRANSMITTAL

Complete and sere this form, together with applicable fee(s), to: Mail MAR 0 7 2006





(571) 273-2885 or Fax

appropriate further co indicated unless corrected maintenance fee notificatio	below or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and PUBLIC ders and notification a) specifying a new co	of maintenance fees orrespondence addres	uired). Blocks I through 5 s will be mailed to the current ss; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for
CÜRRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. T	of mailing can only be used f his certificate cannot be used nal paper, such as an assignm ate of mailing or transmission.	for any other accompanying
Peter V. D. Wild 301 East Landing Williamsburg, VA	-			C I hereby certify that States Postal Service addressed to the M transmitted to the US	ertificate of Mailing or Tran this Fee(s) Transmittal is bein with sufficient postage for fin ail Stop ISSUE FEE address SPTO (571) 273-2885, on the	smission g deposited with the Unitec st class mail in an envelope above, or being facsimile date indicated below.
03/09/2006 TBESHAH2 00000072 502074 10786738				RE	TER V.D. WILDE	(Depositor's name)
01 FC:1501 1400.00 DA				Tetil Helde		(Signature)
02 FC:1504 300	.00 DA			3.6	-06	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/786,738	02/25/2004	David John DiGiovanni		anni	72-14-2-4-2	3005
APPLN. TYPE	SMALL ENTITY	ISSUE F		JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	0	\$300	\$1700	04/11/2006
EXAMINER		ART UN	IIT CI	LASS-SUBCLASS		
HUGHES, JAMES P 28		2883		385-126000		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME ANI	O RESIDENCE DATA TO E	E PRINTED ON	THE PATENT (print of	or type)		
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear on t T a substitute for filin	he patent. If an assig g an assignment.	gnee is identified below, the	document has been filed for
(A) NAME OF ASSIGN	IEE	(E	B) RESIDENCE: (CIT	Y and STATE OR CO	OUNTRY)	
~ "		_	~~	44.000	2-10	

FURUKAWA ELELIKIE NORIH	MAERICA MORLEUSS, CIA.				
Please check the appropriate assignee category or categories (will not be	e printed on the patent):				
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
Issue Fee	A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number				
5. Change in Entity Status (from status indicated above)					
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b: Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
The Director of the USPTO is requested to apply the Issue Fee and Publy NOTE: The Issue Fee and Publication Fee (if required) will not be accenterest as shown by the records of the Upited States Patent and Tradem	lication Fee (if any) or to re-apply any previously paid issue fee to the application identified above, pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office.				

3-6-06 Authorized Signature PETER V. D. WILDE Typed or printed name Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.